## PART B - FEE(S) TRANSMITTAL

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		Alexandria, Virginia 22313-1450 or <u>Fax</u> (703) 746-4000						
INSTEAD AT A STORY OF THE PROPERTY OF THE PROP	m should be used for tran respondence including the lesson or directed otherwise	smitting the ISSU Patent, advance ord in Block 1, by (a)	E FEE and P ders and notif specifying a	UBLIC ication new co	ATION FEE (if requi of maintenance fees w orrespondence address;	red). Blocks 1 through 5 s rill be mailed to the current and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for	
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TOWNSEND AN TWO EMBARCAL EIGHTH FLOOR SAN FRANCISCO		ND CREW, LI	LP	I	I hereby certify that the States Postal Service vaddressed to the Mail transmitted to the USP	tificate of Mailing or Trans is Fee(s) Transmittal is bein vith sufficient postage for fir Stop ISSUE FEE address TO (703) 746-4000, on the o	g deposited with the United st class mail in an envelope above, or being facsimile	
0/26/2004 GWDRDDF2 000	•	25			M. DIANE		(Depositor's name)	
1 FC:1501 1370.					m Dia	ne Drobe	(Signature)	
	DO DA				10-22	104	(Date)	
APPLICATION NO.	FILING DATE	]	FIRST NAMED	INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/750,625	12/29/2003		Robert T.	Weverk	a	019930-000130US	4061	
FITLE OF INVENTION: W	AVELENGTH ROUTER							
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
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PAK, S	UNG H	2874			385-147000			
CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless	dence address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B an assignee is identified be 137 CFR 3.11. Completion	Correspondence ation form e of a Customer E PRINTED ON T	(1) the nam or agents O (2) the nam registered a 2 registered listed, no name THE PATENT	nes of upones of upones of a sattorney dipatent ame will (print of the car on the car on the print of the car on the print of the car on the print of the print o	single firm (having as a or agent) and the nam attorneys or agents. If I be printed.	at attorneys 1 and Cr		
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PTS Corpo	ration		San J	ose,	CA			
Please check the appropriate	assignee category or category	ries (will not be pri	inted on the pa	itent) :	Individual 🖾 C	orporation or other private gr	oup entity 🗖 Government	
4a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of	mall entity discount permitte		Payment b	n the an	nount of the fec(s) is ent t card. Form PTO-2038 hereby authorized by comber		credit any overpayment, to copy of this form).	
_ ~ .	(from status indicated above MALL ENTITY status. See	,	b. Applica	ant is no	longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P	is requested to apply the Issi	ue Fee and Publicat	i from anyone	y) or to other th	re-apply any previousl an the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	David	Slow	e		Date	0/22/04		
Typed or printed name _	David N. Slone	<b>.</b>	· · · · · · · · · · · · · · · · · · ·		Registration	No. <u>28,572</u>		
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Inis collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## RANSMITTAL

Filing Date December 29, 2003 **FORM** First Named Inventor Weverka, Robert T. Art Unit for all correspondence after initial filing) 2874 Examiner Name Unassigned Attorney Docket Number 019930-000130US

10/750,625

Application Number

Total Number of Pages II	n inis Submission		010	3330-0001					
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			PPLICANT, ATTORNEY, (	OR AGEN	T				
or	or								
Individual name David N. Slone Reg. No. 28,572									
<u> </u>	Signature David Slone								
Date Oct	ober 22, 2004								
CERTIFICATE OF TRANSMISSION/MAILING									
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.  Typed or printed name  M. Diane Dubé									
Signature	m. Dia		fabe'		Date	October 22, 2004			

PTO/SB/17 (10-04) Complete if Known FEE TRANSMITTAL 10/750,625 Application Number December 29, 2003 Filing Date for FY 2005 Weverka, Robert T. First Named Inventor Unassigned Effective 10/01/2004. Patent fees are subject to annual revision. **Examiner Name** 2874 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 019930-000130US Attorney Docket No. TOTAL AMOUNT OF PAYMENT (\$)

TOTAL AMO	UNT OF PAYMENT	(\$) 1670		Attorney	Docket	NO.				
METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)					
			None	3. ADD	ITIONA	L FEE		<del></del>		
Check Deposit Accoun		Order Other		Large	Entity	Small			Fee	
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Deposit Account	20-1430		j l	1051	130	2051	65	Surcharge - late filing fee or oath		
Number		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.				
Deposit Account Townsend and Townsend and Crew LLP				1053	130	1053	130	Non-English specification		
Name					2,520	1812	2,520	For filing a request for ex parte reexamination		
The Director is authorized to: (check all that apply)  Charge fee(s) indicated below Credit any overpayments					920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below. except for the filing fee					1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
Charge fee(s) is	ndicated below, except to fied deposit account.			1251	110	2251	55	Extension for reply within first month		
o me apove-identi	FEE CALC	JLATION		1251	430	2252	215	Extension for reply within second mont	h	
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	ode (\$)			1255	2.080	2255	1.040	Extension for reply within fifth month		
001 790 20	001 395 Utility fil	-		1401	340	2401	170	Notice of Appeal		
1002 350 20	002 175 Design			1402	340	2402	170	Filing a brief in support of an appeal		
1000 555	003 275 Plant fil	•	<del> </del>	1402	300	2403		Request for oral hearing		
, oo -		e filing fee onal filing fee		1451	1,510	1451		Petition to institute a public use proceeding		
_	SUBTOTAL (1)		(\$)	1452	110	2452	55	Petition to revive - unavoidable		
				1453	1,330	2453		Petition to revive – unintentional		
2. EXTRA CL	AIM FEES FOR UT	ILITY AND REI	SSUE	1501	1,370	2501		Utility issue fee (or reissue)	1370	
		Fee from		1502	490	2502		Design issue fee	ļ	
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Total Claims	.** =	M	<b>-</b>	1460	130	1460	130	Petitions to the Commissioner	<u> </u>	
l 🗀	= ==	<b></b>		1807	50	180	7 50	Processing fee under 37 CFR 1.17(q)	) <u> </u>	
Independent Claims	•• =		\$ <u>                                    </u>	1806	180	180		Submission of Information Disclosure Stmt		
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Large Entity Fee Fee	Small Entity Fee Fee	Fee Description		1809	790	280	9 395	Filing a submission after final rejection (37 CFR § 1.129(a))	on	
Code (\$) 1202 18	Code (\$) 2202 9	Claims in excess	of 20	. 1810	790	281	0 395	For each additional invention to be examined (37 CFR § 1.129(b))		
1201 88 1203 300	.2201 44 2203 150	Independent clair Multiple depende	ent claim, if not paid	1801	790	280	1 395	Request for Continued Examination (RCE)		
1204 88	2204 44	** Reissue indep over original p	endent claims atent	1802	900	180	900	Request for expedited examination of a design application		
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	SUBTOTAL (2) (\$) **or number previously paid, if greater, For Reissues, see above						ing Fee Pai		370	
**or number pre	viously paid, if greater, For	Reissues, see above	<u> </u>	∟						

		Complete (if applicable)			
SUBMITTED BY		- At (Attached)	28,572	Telephone	650-326-2400
Name (Print/Type)	David N. Slone	Registration No. (Attorney/Agent)	20,012		October 22, 2004
Signature	David	Slone		Date	October 22, 2001
(	The contract of the contract o	the same public Credit	hould not be		